AMENDED IN SENATE AUGUST 20, 2007

AMENDED IN SENATE JULY 17, 2007

AMENDED IN SENATE JUNE 28, 2007

AMENDED IN ASSEMBLY MAY 2, 2007

AMENDED IN ASSEMBLY APRIL 9, 2007

CALIFORNIA LEGISLATURE—2007–08 REGULAR SESSION

## ASSEMBLY BILL

No. 1142

## **Introduced by Assembly Member Salas**

February 23, 2007

An act relating to health facilities.

## LEGISLATIVE COUNSEL'S DIGEST

AB 1142, as amended, Salas. Skilled nursing facilities: hospice *Hospice* care.

Existing law provides for the licensure and regulation of health facilities by the State Department of Public Health.

Existing law defines a "skilled nursing facility" as a health facility that provides skilled nursing care and supportive care to patients whose primary need is that of availability of care on an extended basis. Existing law imposes specified requirements upon skilled nursing facilities with regard to, among other things, its patients, staffing ratios, and the medical services provided by those facilities.

The bill would require the department, no later than January 1, 2009, to identify innovative end-of-life and palliative care models for residents of-long-term health care skilled nursing facilities and residential care facilities for the elderly, as prescribed, and to provide specified

AB 1142 -2-

information about those care models to each licensed freestanding skilled *nursing* facility, *residential care facility for the elderly, home health agency, and hospice* in the state. The bill would also require the department to post related information on those resident care models on the department's Web site.

The bill, in addition, would require the department to conduct a comprehensive review of the state's licensing and reimbursement policies to determine how best to expand and facilitate the availability of quality options for residential hospice in the state and palliative care services delivered to residents of skilled nursing facilities and residential care facilities for the elderly, to work with stakeholders to identify regulatory or statutory barriers inhibiting skilled nursing facilities from implementing model programs for resident hospice services, and to report to the Legislature, on or before January 1, 2009, and make recommendations on the best ways to remove identified barriers.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. (a) The State Department of Public Health, in 2 consultation with the State Department of Social Services, shall, 3 no later than January 1, 2009, identify end-of-life and palliative care models for residents of long-term health care facilities skilled 5 nursing facilities and residential care facilities for the elderly. The identification of those care models shall include an application process that encourages—facilities skilled nursing facilities, residential care facilities for the elderly, home health agencies, and hospices to provide examples of innovative care models and 9 10 facility best practices for end-of-life and palliative care. The 11 department shall review those model care examples and shall select 12 those models that are appropriate for statewide distribution. The 13 department shall also provide each licensed freestanding skilled 14 nursing facility, residential care facility for the elderly, home health 15 agency, and hospice in the state with a description of selected innovative care models, and shall post related information on the 16 17 department's Web site.

(b) The department shall conduct a comprehensive review of the state's licensing and reimbursement policies to determine how best to expand and facilitate the availability of quality options for

18

19

20

-3- AB 1142

residential hospice in the state hospice and palliative care services delivered to residents of skilled nursing facilities and residential care facilities for the elderly. While conducting the review, the department shall work with stakeholders to identify any regulatory or statutory barriers that might inhibit skilled nursing facilities, residential care facilities for the elderly, home health agencies, and hospices from fully implementing model programs for resident hospice services hospice and palliative care services delivered to residents of skilled nursing facilities and residential care facilities for the elderly.

1 2

(c) On or before January 1, 2009, the department shall report to the Legislature findings from the review, as described in subdivision (b), and make recommendations on the best ways to remove any barriers identified as inhibitors for skilled nursing facilities to fully implement model programs for resident hospice services. facilities, residential care facilities for the elderly, home health agencies, and hospices to fully implement model programs for hospice and palliative care services delivered to residents of skilled nursing facilities and residential care facilities for the elderly.